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UNITED STATES DISTRICT COURT

DISTRICT OF NEVADA

IN THE MATTER OF THE APPLICATION
FOR A WAIVER OF THE FEE FOR A COPY
OF THE LOCAL RULES OF PRACTICE FOR
THE DISTRICT OF NEVADA

CASE NO.: 2:10-CV-01564-RLH-RJS.

APPLICATION

I, PETER MUNOZ, do hereby request the Court to waive the requirement to pay the thirty-dollar (\$30.00) fee and to provide me without charge one (1) copy of the Local Rules of Practice of the United States District Court for the District of Nevada. I am unable to pay the required fee, and I further answer the following questions:

1. Are you presently employed? Yes X No

A: If the answer is "Yes", state the amount of your salary or wages per month, and give the name and address of your employer. (List both gross and net salary.)

B: If the answer is "No", state the date of last employment and the amount of the salary and wages per month which you received. - IN PRISON OVER SIX (6) YEARS

2. Have you received within the past twelve (12) months any money from any of the following sources:

A: Business, profession or other form of self employment? Yes No X

B: Rent payments, interest or dividends? Yes No X

C: Pensions, annuities or life insurance? Yes No X

D: Gifts or inheritances? Yes No X

E: Any other sources? Yes No X

If the answer to any of the above is "Yes", describe each source of money and state the amount from each during the past twelve (12) months.

3. List your assets and liabilities: (NONE)

WSPC

4. Do you own any cash, or do you have any money in checking or savings account(s)?
(Include any funds in prison accounts.) Yes ___ No X

If the answer is "Yes", state the total value of account(s).

5. Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property
(excluding ordinary household furnishings and clothing)? Yes ___ No X

If the answer is "Yes", describe the property and state its approximate value.

6. Lists the persons who are dependent upon you for support, state your relationship to those persons, and indicate how much you contribute toward their support.

N/A

7. Indicate why you cannot use the copies of the Local Rules currently available at the Offices of the Clerk of the Court in Las Vegas and Reno, the Nevada State Prison libraries, the public County libraries throughout the State of Nevada, or the Internet at www.nvd.uscourts.gov to meet your needs.

I declare under penalty of perjury that the forgoing is true and correct. I understand that if the Court grants this application, I will not be placed upon a mailing list to receive amendments to the Local Rules. It will be my responsibility to inquire of the Clerk prior to using the Local Rules to insure that the information contained therein is still current.

Executed on: 12/24/2011
(Date)

[Signature] DETER MUNOZ #94605
(Signature of Applicant)

CERTIFICATE (Prison Accounts Only)

I certify that the applicant herein has the sum of \$ 78 on account to his/her credit at the WSPC Institution where he/she is confined. I further certify that the applicant likewise has the following securities to his/her credit according to the records of said institution:

\$ 200.00 in savings

Executed on: 1/3/2012
(Date)

[Signature] AA II
(Authorized Officer of Institution)

DISPOSITION OF APPLICATION

XXXXXX The application is hereby APPROVED.

 The application is hereby DENIED.

Executed on: Jan. 10, 2012
(Date)

[Signature]
XXXX Judge or Clerk of Court XXXX

UNITED STATES MAGISTRATE JUDGE